HEALTH INSURANCE PREMIUM & COST SHARING ASSISTANCE
EFFECTIVE DATE: 11-07-2020

I. PURPOSE

The purpose of Health Insurance Premium & Cost Sharing Assistance is to provide a cost-effective alternative to ADAP by purchasing health insurance that provides comprehensive primary care and pharmacy benefits for low income clients that provide a full range of HIV medications such as paying co-pays (including co-pays for prescription eyewear for conditions related to HIV infection) and deductibles on behalf of the client and providing funds to contribute to a client's Medicare Part D true out-of-pocked (TrOOP) costs.

HIV/AIDS BUREAU POLICY 13-06 Grantees and subgrantees must also assure that individual clients are enrolled in health care coverage whenever possible or applicable. ((HAB), 2019)

II. DEFINITION

None.

III. PROCEDURE

ADAP HealthPlus Alabama (HPAL)

The ADAP-funded health insurance provided by HealthPlus Alabama (HPAL) includes enrollment in a cost-effective health insurance plan. All HPAL clients are enrolled in Blue Cross Blue Shield (BCBS) of Alabama Blue Value Gold plan, with optional standalone dental coverage in BCBS of Alabama Dental Blue Select. HPAL clients have access to the full BCBS of Alabama Blue Value Gold drug formulary.

Alabama's RWHAP Part B lead agency United Way of Central Alabama (UWCA) acts as the insurance benefits manager (IBM) for HealthPlus Alabama (HPAL) clients. The IBM manages insurance enrollment and payment of all associated premiums, copayments, and/or deductibles. Clients successfully enrolled in HPAL will receive a health insurance card directly from Blue Cross of Blue Shield (BCBS) of Alabama. HIV/AIDS BUREAU POLICY 13-05: Requirements and Expectations Specific to Part B AIDS Drug Assistance Program (ADAP) ADAP funds may be used to cover costs associated with a health insurance policy, including co-payments, deductibles, or premiums to purchase or maintain health insurance coverage. (Administration, 2014)

A secondary HPAL benefits card will be issued by UWCA to cover prescription copayments and certain medical and mental health copayments and deductibles. If enrollment in the optional standalone dental insurance is requested, a second dental insurance card will be issued by BCBS of Alabama and UWCA will issue a DentalPlus Alabama (DPAL) benefits card to cover dental deductibles and payments.

Clients must present both the primary BCBS of Alabama insurance card and the secondary HPAL/DPAL benefits card to any participating in-network pharmacy, health care providers and/or dental provider to ensure full payment. The HPAL/DPAL benefits card will ensure ADAP is billed for the customer portion of the copayment and/or deductible.

ADAP Medicare Approved Part D Plan (Blue Rx Enhanced Plus)

ADAP-funded prescription insurance provided by the Medicare Approve Part D Plan (Blue Rx Enhanced Plus) includes enrollment in a cost-effective Medicare Part D prescription insurance plan. Premiums and out of pocket prescription payments are covered by ADAP. Clients have access to the full prescription formulary offered under the Medicare Part D prescription insurance plan.

Alabama ADAP provides cost sharing with Medicare Blue Rx Enhanced Plus by paying the premium for Medicare Part D services for Enhance Plus. Blue Rx Enhanced Plus pays monthly Medicare Part D prescription insurance premiums and all associated customer payments for prescription medications. Blue Rx Enhanced Plus clients have access to the full BCBS of Alabama Blue Rx Enhanced Plus drug formulary. Alabama's RWHAP Part B lead agency, UWCA also acts as the Insurance Benefits Manager (IBM) for Blue Rx Enhanced Plus clients, managing Medicare Part D prescription insurance enrollment and payment of all associated premiums.

ADAP Prescription Only (ADAP-RX) Plan

Includes a limited drug formulary of the Food and Drug Administration's (FDA) approved antiretroviral (ARV) and opportunistic infection (OI) medications to treat HIV disease; as well as other medications aimed at improving the overall health of PWH in Alabama. The ADAP drug formulary includes at least one drug from each class of HIV ARV medications.

Ramsell Corporation provides pharmacy benefits manager (PBM) services for all ADAP-Rx, HPAL & Enhanced Plus clients, allowing access to a broad network of BCBS of Alabama retail pharmacies that are contracting with Ramsell for HPAL and Medicare Approved Blue Rx Enhanced Plus (Blue Rx Enhanced Plus) PBM services.

A secondary benefits card for HPAL, Medicare Part D (Enhanced Plus), and ADAP prescription-only will be issued by Ramsell to cover prescription drugs and copayments. Clients must present both the primary BCBS of Alabama insurance card and the secondary HPAL and Enhanced Plus benefits card to any participating in-network pharmacy.

A Service Unit

A service unit of Health Insurance Premium & Cost-Sharing Assistance is documented per service provided (i.e., a single invoice or one payment equals one service unit) as "Health Insurance Premium & Cost-Sharing Assistance." All units are billed by actual costs and each unit can change based upon the invoice amount. Health Insurance Premium & Cost Sharing Assistance is recorded in ServicePoint, with a corresponding dollar amount.

Key Activities
- Eligibility determination
- Ensuring payer of last resort
- Expenditure monitoring
- Records management

Expenditure Monitoring

Health Insurance Premium & Cost-Sharing Assistance requires careful monitoring of expenditures to ensure funding will be available throughout the program year. Funded agencies must be able to track the total amount of Health Insurance Premium & Cost-Sharing Assistance funding provided.

Standard	Measure
1.1) Part B providers will effectively utilize and allocate expenditures. No payment may be made directly to clients, family, or household members.	1.1) The Part B provider has a procedure to monitor/manage expenditures of Health Insurance Premium & Cost-Sharing that ensures funding will be available throughout the program year. The Part B provider will track utilization of assistance. The Part B provider must track use of funds to ensure the total combined amount per client must not exceed the determined award amount per contract year.
1.2) No payment may be made directly to clients, family, or household members.	1.2) Provide mechanism through which payment can be made on behalf of the client.
Documentation	
1.1) Evidence of Tracking system	1.2) Part B provider will produce and maintain documentation ensuring payments were made to appropriate vendors.

Records Management

Documentation is written proof or evidence that client received Health Insurance Premium & Cost-Sharing.

Standard	Measure
Records will reflect compliance with the Health Insurance Premium & Cost-Sharing Assistance standards outlined above. Records should be complete, accurate, confidential, and secure.	Part B providers of Health Insurance Premium & Cost Sharing Assistance will maintain records for each client served.
Documentation	
Health Insurance Premium & Cost-Sharing records include: • Date client received assistance • Documentation that the client meets eligibility criteria • Copy of check or voucher. Health Insurance Premium & Cost-Sharing Assistance services will be documented as a case note in ServicePoint, with corresponding service unit and dollar amount.	

References

1. (HAB), Health Resources and Health Services Administration (2019, May 1). Clarifications on Ryan White Program Client Eligibility Determinations and Recertifications Requirements. Retrieved from hab.hrsa.gov.: https://hab.hrsa.gov/sites/default/files/hab/Global/pcn1302clienteligibility.pdf

2. (HAB), Health Resources and Health Services Administration (2014, June 6), PCN 13-05 Premium and Cost Sharing Assistance for Private Health Insurance. Retrieved from https://hab.hrsa.gov/sites/default/files/hab/Global/pcn1305premiumcostsharing.pdf